PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number			
<b> </b>									۵(	54	38623	
	<u>.</u>	CLAIMS A	AS FILED - (Colum			(Column 2)		SMALL ENT	mry .	OR	OTHER SMALL I	
บ.ธ	. NATIONAL	STAGE FEES		·			1	RATE	FEE	1 .	RATE	FEE
BAS	SIC FEE		SMALL ENT.	. = \$ 150	LAR	GE ENT. = \$ 300	1 !	BASIC FEE		OR	BASIC FEE	300
EX	AMINATION FE	ΞE	Satisfies PCT A		1	ther situations =	1 1	EXAM. FEE	<del>                                     </del>		EXAM. FEE	200
SEARCH FEE .			U.S. Is ISA = \$ ALL other cou	U.S. Is ISA = \$50 / \$100 ALL other countries = . \$ 200 / \$400		All other situations = \$ 250 / \$ 500		SEARCH FEE	·		SEARCH FEE	400
FEE	FOR EXTRA S	SPEC. PGS.	<del>                                     </del>	us 100 =		/ 50 <b>=</b>		X \$ 125 =		1 '	X \$ 250 =	
тот	TAL CHARGEAE	BLE CLAIMS	28 mir	inus 20 =	. 8	. 8		X \$ 25 =		OR	X \$ 50 =	400
IND	EPENDENT CL	AIMS		ninus 3 =	<del>                                     </del>	0		X \$ 100 =		OR	X \$ 200 =	2000
MUL	TIPLE DEPEN	IDENT CLAIM PRE	ESENT				1 /	+ \$ 180 =		OR	+ \$ 360 =	
• If	the difference	e in column 1 is l	less than zero	), enter "(	o" in cc	' in column 2		TOTAL		OR	TOTAL	<u> </u>
<del>,     </del>	10/./	(Column 1)	AMENDED	AMENDED - PART II  (Column 2) (Column 3)  HIGHEST			<b>T</b>	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	8/4/6	REMAINING AFTER AMENDMENT		PREVIO	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
MON	Total	. 98	Minus	-2	8	s /		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	13	Minus	/3	<u>ک</u> _	-/		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	SENTATION OF M	IULTIPLE DEPI	ENDENT (	CLAIM		1. [	+ \$ 180 =		OR	+ \$ 360 =	
• .	-	-					· -	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	2)	(Column 3)					-	
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=	1	X \$ 25 =		OR	X \$ 50 =	
AME.	Independent	•	Minus	***		a	1.	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESI	ENTATION OF MI	ULTIPLE DEPE	ENDENT C	CLAIM		1.	+ \$ 180 =		OR	+ \$ 360 =	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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